REGULATORY REQUIREMENTS
FOR
CERTIFICATION

1) U.S. DEPARTMENTS OF LABOR & EDUCATION DEFINITIONS

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WITH
INTERNATIONAL BOARD OF HYPNOTHERAPY

1) U.S. DEPARTMENTS OF LABOR & EDUCATION DEFINITIONS

Hypnotherapy as a Career
U.S. Department of Education Program Description: Hypnotherapy Training
"An instructional program that prepares individuals to use hypnosis (trance) as the primary technique in a process of reeducation at the mental/emotional levels for the purposes of solving problems, developing motivation, and setting and achieving goals. Teaches applications of hypnosis in health sciences and human services. Prepares students for certification examination."
Approved by U.S. Department of Education for inclusion in
A Classification of Instructional Programs, published
by the U.S. Department of Education.

Hypnotherapy Training Program has been assigned a six-digit identification number and is classified under "Human Services" in the "Health Sciences and Human Services" division. (CIP Code 51.3603)

U.S. Department of Labor Occupational Title: Hypnotherapist
079.157.010 – Hypnotherapist (alternate title: Master Hypnotist)
As defined in *the Dictionary of Occupational Titles*
published by the United States Department of Labor
"Hypnotherapist induces hypnotic state in client to increase motivation or alter behavior pattern through hypnosis. Consults with client to determine the nature of problem. Prepares client to enter hypnotic states by explaining how hypnosis works and what client will experience. Tests subjects to determine degrees of physical and emotional suggestibility. Induces hypnotic techniques of hypnosis based on interpretation of test results and analysis of client's problem. May train client in self-hypnosis conditioning."

New Mexico Higher Education Department
The Hypnotherapy Academy of America is the only school licensed by the New Mexico Higher Education Department to teach hypnotherapy and clinical hypnotherapy in the state of New Mexico. License Number 116.

2) CLIENT INTAKE FORM REQUIREMENTS

In the first session you are required to provide clients with a questionnaire and intake form to determine if they need to be referred to a physician or licensed therapist. The inclusion of the following information accurately informs clients about your education and the services you provide. Compliance with these requirements facilitates the client in getting the best care while helping to preserve the practice of hypnotherapy.

INCLUSION: MANDATORY

Client Information and Participation Agreement
(This is a sample form.)

Services Provided
YOUR NAME provides the following services:
Hypnotherapy, Self-hypnosis Training.
Hypnotherapy is an educational process that facilitates access to internal resources that assist people in solving problems, increasing motivation, or altering behavior patterns to create positive change.

Education and training in Hypnotherapy is classified under Human Services in the Health and Human Services Division of the Classification of Instructional Programs by the United States Department of Education.
(If you are licensed by your state regulatory agency to practice counseling, psychotherapy or medicine as physician, you will need to add to the above description of services.)
At OFFICE ADDRESS
International Board of Hypnotherapy Certification Number: NUMBER FROM IBH CERTIFICATE

This information will be used to aid in serving you as the client. Please answer honestly and know that answering yes or no to any particular question does not mean that you cannot receive services from this practitioner. Your honest answers serve in your receipt of appropriate care and service. All information will be kept confidential within the Health Insurance Portability and Accountability Act (HIPAA) regulations.

Client's Name _____
Address _____ Apt _____
City _____ State _____ Zip Code _____
Email Address _____
Is it okay to use this email to confirm appointments or send self-hypnosis audio files?
Phone number (preferred) (_____)_____
Is it okay to leave phone messages for you at this number?
Age _____
Marital Status _____
1. What is the main reason you would like hypnotherapy sessions?
2. Medical conditions or challenges:
3. Are you currently under a physician's care for any of the above conditions?
    a) If so, name of physician:

4. When was your last visit with a physician?
5. Was anything about this visit notable? If so, explain briefly:
6. Are you currently taking any medication(s)?
    a) If so, what are the names of the medications and how do they affect you?
7. Have you spoken to your physician about hypnotherapy as an adjunct to your treatment?
8. Have you ever had any mental health treatment, such as with a counselor, therapist, or psychiatrist?
    a) If yes, give a brief history of your mental health treatment and the results of your treatment:
9. Are you receiving any mental health treatment now?
    a) If yes, name of mental health professional:
    b) Have you spoken to your mental health professional about hypnotherapy as an adjunct to your treatment?
10. Do you have thoughts of hurting yourself or taking your own life?
11. Do you have thoughts of hurting someone else or taking their life?
12. Do you take any prescribed psychotropic medications?
    a) If yes, what are the names of the medications, and how do they affect you?
13. Were you referred to me?
    a) If so, by whom?

Limits on Confidentiality of Information

Clients have a right to expect that information revealed in sessions not be disclosed without extraordinary justification. The conditions that justify the release of information and by law must be reported to the appropriate agencies, are the following:

1. Knowledge of child abuse or neglect.
2. Knowledge of senior citizen abuse or neglect.
3. A client poses a serious risk of suicide and is an imminent danger to self.
4. A client poses a threat of imminent danger to another person.
5. By a court issued subpoena, may obtain information.
6. Report to law enforcement authorities knowledge of a felony that has been, or is being committed.

In other situations, signed authorization for release of information is required.

Client _____ Date _____

INCLUSION: OPTIONAL

13. Briefly describe your spiritual/religious beliefs or life philosophy:
14. Have you ever been hypnotized?
    a) If so, briefly explain your experience:
15. Other issues or areas I would like to resolve:

__ Situational Stress
__ Fears
__ Self Esteem or Shyness
__ Lack of Motivation
__ Body Shape
__ Spiritual Growth
__ Forgiveness
__ Job Performance
__ Unwanted Habits and Self Control
__ Smoking Cessation
__ Sports Performance
__ Self Confidence

__ Test Taking/Accelerated Learning/Memory Improvement

__ Chronic Pain (already assessed by a physician)

__ Accelerated Healing (already assessed by a physician)

(Have your own legal advisor review this section before using.)
Agreement:

I personally know of no case on record where an individual has been harmed by the use of these methods. I do know of thousands of cases where people of all walks of life have benefited greatly from the use of these methods. As a general practice, it is necessary for everyone taking part in private sessions, classes, workshops and seminars with YOUR NAME, to sign this Release of Liability Agreement. I am of legal age, and in consideration of my acceptance as a participant in this private hypnotherapy session, seminar, or workshop, I for myself, my heirs, my executors, administrators and assignees, do hereby release and discharge YOUR NAME and any of her employees, her employer, or other participants in any of the activities, from all claims of damages arising from, or growing out of my participation in said activities. I agree that any claim of damages or disputes arising from my participation in hypnotherapy sessions, seminars, workshops, or events, should it arise, shall be settled by binding arbitration before an extra-judicial arbitration and mediation service selected by the parties. I further understand that recordings may be made at any of these sessions, seminars, workshops or events, and that YOUR NAME retains the copyright to all of these recordings.

Signature _____ Date _____
If under eighteen years of age:
Legal Guardian: _____ Date _____

In order to be more successful in reaching my goals, I agree to:

1. Be an active participant in my hypnotherapy experience and see myself as a partner in the transformative nature of this process.
2. Recognize that my thoughts, feelings, images and actions have a direct effect on the quality of my life.
3. Acknowledge that my well-being depends directly on how well I care for myself physically, emotionally, intellectually and spiritually.
4. Accept that blaming others or myself is totally futile.
5. Take responsibility for my experience of life, because I create my life experience to the best of my ability in the moment, with what I know right now.
6. I agree to be on time for my sessions and allow at least 24 hours of advance notice should I need to cancel or reschedule a session. YOUR PHONE NUMBER

Client / Co-Therapist _____ Date _____

My commitment to you: I will use my expertise to facilitate the changes that are mutually agreed upon to be in your best interest, in the shortest possible time.
Hypnotherapist YOUR NAME Date _____

INCLUSION: MANDATORY

(For Intake Form)

I understand that all services provided by __YOUR NAME__ are for educational and self-improvement purposes only. I further understand that __YOUR NAME__ does not practice psychotherapy or medicine. His/Her services are not the practice of psychotherapy or medicine and are, therefore, not offered as a substitute for counseling, psychotherapy, psychiatric or medical treatment. Consultation and/or referral from a licensed physician or mental health professional may be required before hypnotherapy services are provided.

Client _____ Date _____

(If you are licensed by your state regulatory agency to practice counseling, psychotherapy or medicine as a physician, you will need to edit the above description of services.)

3) CONSUMER PROTECTION AND CLIENT COMPLAINT MECHANISM

During the first visit you are required to provide the client with the standard refund policy and complaint mechanism found below. The client complaint mechanism requires that hypnotherapists provide clients with the contact information of the International Board of Hypnotherapy. The IBH only accepts client complaints in writing.

INCLUSION: MANDATORY

Customary Refund Policy

__YOUR NAME'S__ refund policy is based on client's satisfaction with their hypnotherapy experience. If a client expresses dissatisfaction with their hypnotherapy sessions, a full refund will be offered to the client. If the client chooses to accept a refund, it will be immediately provided.

If a Client Has a Complaint

If you should have a complaint about the facilitation process that has not been satisfactorily resolved by __YOUR NAME__, please feel free to contact the International Board of Hypnotherapy at 2132 Osuna Rd. NE, Suite B, Albuquerque, NM 87113. It is your right to refuse any aspect of his/her services and to seek the service of another provider at any time. __YOUR NAME'S__ fee is __FEE AMOUNT__. Sessions are from 45 to 90 minutes in length.

4) DISCLAIMER FOR PROMOTIONAL MATERIALS, INCLUDING ALL WEBSITE PAGES

"A disclaimer is a statement that is meant to prevent an incorrect understanding of something (such as a book, a movie, or an advertisement.)" (www.merriam-webster.com, accessed November 2013). To clarify services provided, the following is to be at the bottom of each of your web pages, newsletters, etc.

INCLUSION: MANDATORY

Hypnotherapy is an educational and self-improvement process that facilitates access to a person's internal resources to assist him/her in solving problems, increasing motivation, or altering behavior patterns to create positive change.

Hypnotherapy is not a substitute for medical treatment or psychotherapy. YOUR NAME does not practice medicine or psychotherapy and his/her services are not a replacement for counseling, psychotherapy, psychiatric or medical treatment. No service or product provided is intended to diagnose or treat any disease or illness, psychological or mental health condition.

Medical Support Hypnotherapy
Medical support hypnotherapy is used only as an adjunct to conventional medical treatment. Consultation with a licensed physician is required before medical support hypnotherapy services are provided.

(If you are licensed by your state regulatory agency to practice counseling, psychotherapy or medicine as a physician, you will need to edit the above description of services.)

5) PERMISSIBLE CREDENTIALING INITIALS

In order to not mislead consumers with credentialing initials that do not pertain to an education or certification in hypnotherapy, only use initials based on the wording found on your IBH certificate.

CHP for Certified Hypnosis Practitioner
CHt for Certified Hypnotherapist.
CCHt for Certified Clinical Hypnotherapist
CMS-CHt for Certified Medical Support Clinical Hypnotherapist.
FIBH for Fellow of the International Board of Hypnotherapy.

Initials including, but not limited to: MD for Medical Doctor, BA for Bachelor of Arts, MA for Master of Arts, PhD for Doctor of Philosophy, Dr. for Doctor, etc. are permissible only if you are licensed by your state regulatory agency to practice counseling and psychotherapy or medicine as a physician. Applicants for membership may ask for special consideration by submitting written justification for the consideration.

6) CODE OF ETHICS

The IBH strongly recommends that you publish the Code of Ethics on a page of your website.

Preamble: Hypnotherapists help people use their own inner resources to improve the quality of their lives. Hypnotherapists are committed to the service of life, which includes health and well-being—the actualization of human potential. Hypnotherapists therefore take on the role of practitioner of hypnotherapy, life skills and achievement coach and educator.

The International Board of Hypnotherapy (The Board) bases its Code of Ethics on the fundamental principles of the Clinical Hypnotherapy profession, which embraces the uniqueness, worth, dignity and equal rights of all human beings.

The International Board of Hypnotherapy requires all of its members to conduct their profession according to the following ethical principles.

The Members' Ethical Responsibility To Clients

1. The members' main responsibility is the client's safety and welfare. They are to respect the client's mental and physical well-being at all times.

2. The members are not to practice any form of discrimination on the basis of race, ethnic culture, age, sexual orientation, gender, marital status, religion, national origin, political belief, physical handicap, or any other characteristic or personal condition.

3. The members are to uphold a professional relationship with clients, and not engage in physical abuse, hugging or touching in an erotic way or any other sexual activities.

4. The members are to seek advice of colleagues, mentors and supervisors whenever the consultation is in the best interest of clients.

5. In compliance with HIPAA regulations, the members are to respect the privacy of clients and hold in confidence information acquired during the course of professional service. Also, members are to inform clients fully about the limits of confidentiality. The limits on confidentiality are provided to the client in writing prior to entering into a client-therapist relationship. On the client intake form, the client is to give written permission for use of voicemail, email or emailing MP3 files of customized self-hypnosis. Hypnotherapist is to clarify with client what type of communication may occur via email. If a member chooses to communicate or conduct sessions via video conferencing, he or she is to use HIPPA compliant video conferencing software.

6. The members are to obtain consent of clients before audio or video recording or permitting others to be present during their sessions or activities.

7. The members are to practice hypnotherapy services in accordance with the level of their training, competency and respecting the laws of their state.

8. Members are to inform clients of what to expect during sessions, so that they can make an informed decision as to whether they consent to participate.

9. Members are to work with only those clients that fall within their scope of practice.

10. Members are not to have any intimate social contact with a client for at least two years after their last session with the client.

11. Continuing education keeps practitioners informed of the latest developments in the field of hypnotherapy and reduces unethical behavior. Thirty hours of continuing education is required per two-year re-certification period.

12. Members are to fully disclose their educational qualifications and professional credentials and certifications to their clients in writing on their client intake forms.

13. Members agree not to use wording in the title of their business or any other promotional materials that could mislead the public.

14. Members agree to be accurate in their description of their services, business name, and work place, so as not to imply in their advertising and marketing communications that their hypnotherapy services are in any way the practice of medicine, psychotherapy or that they are *licensed* to practice hypnotherapy.

15. Members agree to be truthful in advertising and marketing communications. Also, members agree that they will not in any way state or imply in their advertising and marketing communications that they provide medical or psychotherapy services if they are not licensed by their state board of regulation to do so. Members agree that Hypnotherapy will not be offered as a substitute for medical or mental health treatment. Hypnotherapy sessions are provided as a complement or adjunct to medical and mental health treatment only with a licensed physician or therapist's consent or referral.

16. Members agree that as a hypnotherapist they will not use the following words in any of their promotional materials or marketing communications, such as websites, print brochures, newsletters, business cards, etc.: "psychologist," "psychotherapist," "psychotherapy," "psychological," "counseling," "therapist," "medical hypnotist," "licensed hypnotherapist," "doctor of hypnotherapy," "treatment," "treatment of..." any mental disorders or mental health conditions or medical ailment, this includes but is not limited to "anxiety," "addiction," "insomnia," "depression," "trauma," "eating disorder," and other words like: "cure," "clinic," "patient," "alternative." Again, members agree not to imply that they are practicing psychotherapy or medicine, unless they are licensed by the state they practice in to do so.

17. Members agree that clients should seek the appropriate and highest level of care and that members will therefore be reasonable in their practice of hypnotherapy. Members agree not to provide hypnotherapy services if a client's behavior, or statements, would lead a reasonable person to believe that such a client should be assessed by a licensed physician or mental health professional.

(If already licensed by a board of regulation, for example as a therapist, psychologist, clinical social worker, or physician, and you also provide hypnotherapy services, elements of #16 and #17 may not pertain.)

18. Members understand that their hypnotherapy school training prepared them for certification by the International Board of Hypnotherapy. Hypnotherapy is a “non-licensed” profession, licensing of a professional group can only be authorized when a law is passed by a state legislature and then implemented by a state regulatory agency. They will not use the words “affiliated,” “licensed” or “approved” by the IBH. Members may refer to themselves as “certified” by the IBH or that they are a “member” of the IBH, or if they have achieved level 3 certification status, “fellow” of the IBH.

19. Members agree that foundational training for certification in hypnotherapy should be live, in the classroom setting, with instructors. Foundational training in hypnotherapy online or via correspondence course is inappropriate. It is the IBH position that any field that includes direct client or patient care, must be taught in a classroom setting.

Fees

1. The members are to set their fees in a fair and reasonable manner.

2. The members are not to give any kind of economic compensation for receiving or making a referral, i.e., “finders fees” or cash “kickbacks” (including multilevel marketing type of compensation) for clients or seminar attendees.

3. Prior to conducting sessions members disclose their fees, what type of methods will be used and what the client can generally expect to experience with the methods described.

4. Members are to provide clients with the IBH refund policy and client complaint mechanism in writing.

The Members’ Ethical Responsibility to Colleagues

1. Whenever dealing with unusual or difficult cases, ethical conduct concerns or other dilemmas related to their practice, members are to seek the advice of other Board members.

2. The members are to treat colleagues with respect and professional decorum, during all interactions, including but not limited to phone conversations, email and social media. Negative comments, judgmental language, speculation and gossip will result in revocation of certification.

3. The members are to respect confidences shared by colleagues in the process of their professional relationships.

4. The members are not to exploit a dispute between a colleague and employer to obtain a position in a company.

5. The members are to seek the mediation of a superior or administrator when conflicts with colleagues arise to reach appropriate and equitable solutions.

6. The members are to relate to clients of colleagues in a professional manner.

7. The members are not to solicit the clients of colleagues.

The Members' Ethical Responsibility to the Hypnotherapy Profession

1. The members are to maintain high ethical standards of behavior to protect their profession.

2. The members are to take actions to correct all unprofessional and unethical practices.

3. The members are to always be honest about the origin of their professional degrees, education, certifications or other qualifications.

4. The members are to advertise their professional services with honesty and good faith. They are to insure that all their marketing and promotional materials are truthful and realistic. Members acknowledge that medical support hypnotherapy sessions are provided as a complement or adjunct to medical and mental health treatment and only with a licensed physician or therapist's consent or referral.

5. Members are committed to their own personal growth, continuing education, and actively pursue self-actualization.

6. The members agree to conduct their practices and all professional relationships in accordance with the International Board of Hypnotherapy Code of Ethics and in accordance with State Law.

7. The members understand that they are responsible for completion and maintenance of all certification and re-certification requirements. Members understand that failure to complete their documentation results in non-certification or revocation.

8. Members agree that foundational training for certification in hypnotherapy should be live, in the classroom setting, with instructors. Foundational training in hypnotherapy online or via correspondence course is inappropriate. It is the IBH position that any field that includes direct client or patient care, must be taught in a classroom setting.

Claim of Unethical Behavior

1. After the Board has received via U.S. mail, a written complaint, signed by the complainant, an ethics committee will be formed to review the complaint. Depending on the nature of the written complaint immediate suspension may be issued, then the ethics committee will form a quorum to receive testimony from all involved parties. After the complaint and response to the complaint are reviewed by the quorum and it has reached a decision, it will issue a report, then, the parties will have 30 days to respond to the quorum's findings. A failure by the accused to respond to the complaint within the allotted time will not prevent the quorum from taking action accordingly. Actions the quorum may recommend include: 1) dismissal of the claim, 2) written warning, 3) request requiring actions by the respondent to correct unethical/unprofessional conduct in a

reasonable amount of time, 4) suspension, 5) revocation of membership, 6) hold further action until a Court finding has been reached and submitted to the Board. After doing so, the ethics committee will submit its recommendations to the Board.

IBH CONTACT INFORMATION:

INTERNATIONAL BOARD OF HYPNOTHERAPY
2132 Osuna Rd. NE, Suite B, Albuquerque, NM 87113
Phone: 505-767-8030, Fax: 505-344-1861
Email: certification@hypnotherapyacademy.com

7) SIGNATURE PAGE

I understand that the regulatory requirements for certification with the International Board of Hypnotherapy are a necessary part of client care as well as the preservation of the practice of hypnotherapy.

By signing below, I _____, acknowledge that I received and will abide by the regulatory requirements for certification with the International Board of Hypnotherapy.

_____ _____

Signature Date